

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GUN RIGHTS AMERICA

ADDRESS (number and street)

2300 W EISENHOWER BLVD

Check if different  
than previously  
reported. (ACC)

LOVELAND

CO

80537-3150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00742635

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

BACKER, DAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BACKER, DAN, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GUN RIGHTS AMERICA

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		15		2020

To:

M M	/	D D	/	Y Y Y Y Y
11		23		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**GUN RIGHTS AMERICA**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		15		2020

To:

M M	/	D D	/	Y Y Y Y
11		23		2020

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15755.00

119050.02

(ii) Unitemized .....

8862.00

88631.75

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

24617.00

207681.77

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

25000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

24617.00

232681.77

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

163.25

163.25

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)).....▶

24780.25

232845.02

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

24780.25

232845.02

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4430.04	7101.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4430.04	7101.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	52049.51	103374.72
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	100.00	100.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	56579.55	110576.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56579.55	110576.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24617.00	232681.77
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24517.00	232581.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	4430.04	7101.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	163.25	163.25
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	4266.79	6938.74

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 92  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ALBRITTON, MARTHA, , ,**

Mailing Address 38 OAK RDG

City  
VENUSState  
FLZip Code  
33960FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2020

Transaction ID : A95EDABF26A2D4CFD99E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BEIDLEMAN, MICHAEL, , ,**

Mailing Address 2326 AIRPORT WAY S STE A

City  
SEATTLEState  
WAZip Code  
98134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PRESIDENTOccupation (for Individual)  
INTER CITY TRUCKING,HONOLULU I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

Transaction ID : AD70183E73CAE47ABA1A

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CROW, SANDRA, , ,**

Mailing Address 7200 CRAIN HWY

City  
UPPER MARLBOROState  
MDZip Code  
20772FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2020

Transaction ID : AE44E256F76894C3092E

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1250.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUN RIGHTS AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KNIGHT, RUSSELL, , ,

Mailing Address 3673 LONE LOOKOUT RD

City

TRAVERSE CITY

State

MI

Zip Code

49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : A5C6EA1540CB8410C90D

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNIGHT, RUSSELL, , ,

Mailing Address 3673 LONE LOOKOUT RD

City

TRAVERSE CITY

State

MI

Zip Code

49686

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2020

Transaction ID : A2B207F07768E4DDF8B6

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LONETTI, JOHN, , ,

Mailing Address P.O. BOX 970

City

MESQUITE

State

NV

Zip Code

89024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

Transaction ID : AE6C115A5BD4744998DD

Amount of Each Receipt this Period

3000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

3105.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 92

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LONG, RALPH, , ,**

Mailing Address 120 COUNTY ROAD 230

City  
FLORENCE

State  
AL

Zip Code  
35633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2020

Transaction ID : A317CE389FF384E6E913

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MEYER, ROBERT, , ,**

Mailing Address 15 SAN ANGEL CT

City  
WILLIAMSBURG

State  
VA

Zip Code  
23185

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

Transaction ID : AB461EF70937B4E0D84C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PUSTA, LENORA, , ,**

Mailing Address 138 W SUNFLOWER DR

City  
PAYSON

State  
AZ

Zip Code  
85541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2020

Transaction ID : ACF5A68BAC0C4483C893

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5650.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 92

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STARCHER, RAY, , ,**

Mailing Address 3280 GRANVIEW RD

City  
GRANVILLE

State  
OH

Zip Code  
43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2020

Transaction ID : A2133FA8A2C6A4B2AA11

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STEVEN, STODDARD, , ,**

Mailing Address 6255 TURPIN HILLS DR

City  
CINCINNATI

State  
OH

Zip Code  
45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PILOT

Occupation (for Individual)  
AMERICAN AIRLINES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : A2282AA40745044C9AA2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TOPPER, LEWIS, , ,**

Mailing Address 3605 CAMP MINEOLA RD

City  
MATTITUCK

State  
NY

Zip Code  
11952

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
EXECUTIVE

Occupation (for Individual)  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

Transaction ID : AD1D0EAC9646541CF9D6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5750.00

15755.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. FIRST ADVANTAGE BANK**

Mailing Address 1430 MADISON ST

City  
CLARKSVILLEState  
TNZip Code  
37040-3866Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2020

FEC Identification Number

**C****Transaction ID : BF326819033**

Amount of Each Disbursement this Period

202.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address PO BOX 3900

City  
SAN FRANCISCOState  
CAZip Code  
94139-0001Purpose of Disbursement  
DIGITAL ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2020

FEC Identification Number

**C****Transaction ID : B69B620C41f**

Amount of Each Disbursement this Period

100.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2020

FEC Identification Number

**C****Transaction ID : BE459D8614**

Amount of Each Disbursement this Period

845.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1147.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2020

Mailing Address 2300 W EISENHOWER BLVD

FEC Identification Number

**C****Transaction ID : BDC05A4F54**

Amount of Each Disbursement this Period

27.19

☐ Memo ItemCity  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2020

Mailing Address 2300 W EISENHOWER BLVD

FEC Identification Number

**C****Transaction ID : B2D7B9DC61**

Amount of Each Disbursement this Period

323.97

☐ Memo ItemCity  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2020

Mailing Address 2300 W EISENHOWER BLVD

FEC Identification Number

**C****Transaction ID : B3E72EBA51**

Amount of Each Disbursement this Period

123.65

☐ Memo ItemCity  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

474.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : B220DBE6E4**

Amount of Each Disbursement this Period

147.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONAL ASSOCIATION FOR GUN RIGHTS**

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150Purpose of Disbursement  
ONLINE DISTRIBUTION COSTS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : B9274E9389C**

Amount of Each Disbursement this Period

123.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POLITICAL.LAW PLLC**Mailing Address 441 N LEE ST  
STE 300City  
ALEXANDRIAState  
VAZip Code  
22314-2301Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : B5DCFD97**

Amount of Each Disbursement this Period

550.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

821.47

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. POLITICAL.LAW PLLC**Mailing Address 441 N LEE ST  
STE 300City  
ALEXANDRIAState  
VAZip Code  
22314-2301Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		20		2020

FEC Identification Number

**C****Transaction ID : B93A8573FA!**

Amount of Each Disbursement this Period

1173.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2020

FEC Identification Number

**C****Transaction ID : B33F793F448**

Amount of Each Disbursement this Period

115.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		20		2020

FEC Identification Number

**C****Transaction ID : BD88CD9B4!**

Amount of Each Disbursement this Period

1.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1291.44

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 92

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

## **A. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2020

FEC Identification Number

C

Transaction ID : B07BEA65DF

Amount of Each Disbursement this Period

164.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 23 / 2020

FEC Identification Number

C

Transaction ID : B8C9BDE7BC

Amount of Each Disbursement this Period

7.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2020

FEC Identification Number

C

Transaction ID : B2F02C1572

Amount of Each Disbursement this Period

3.71

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.91

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 92

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : BFA75B5383

Amount of Each Disbursement this Period

7.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	0			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : BAAEF914F7

Amount of Each Disbursement this Period

2.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : BFBAC64C11

Amount of Each Disbursement this Period

2.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.90

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 92

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

## **A. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2020

FEC Identification Number

C

**Transaction ID : B948F85ACC**

Amount of Each Disbursement this Period

5.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 05 / 2020

FEC Identification Number

C

**Transaction ID : B0499F11770**

Amount of Each Disbursement this Period

4.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 06 / 2020

FEC Identification Number

C

**Transaction ID : B035CB41E5**

Amount of Each Disbursement this Period

1.35

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11.94



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 92

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

## **A. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2020

FEC Identification Number

C

**Transaction ID : BACECB143I**

Amount of Each Disbursement this Period

9.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2020

FEC Identification Number

C

**Transaction ID : B1512C1BD8I**

Amount of Each Disbursement this Period

1.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RALLY PAY**

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103-1732

Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 18 / 2020

FEC Identification Number

C

**Transaction ID : B301C8809D**

Amount of Each Disbursement this Period

0.75

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. RALLY PAY**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		19		2020

Mailing Address 995 MARKET STREET, FLOOR 2

City  
SAN FRANCISCOState  
CAZip Code  
94103-1732Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : BF165C1091**

Amount of Each Disbursement this Period

90.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		16		2020

Mailing Address 2700 BROADWAY ST

City  
BOULDERState  
COZip Code  
80304-3543Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : B4EBB6F5B3**

Amount of Each Disbursement this Period

353.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

443.62

**TOTAL** This Period (last page this line number only).....▶

4390.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. FENNER, STEPHEN, , ,**

Mailing Address 850 SW 138TH AVE APT D105

City  
PEMBROKE PINESState  
FLZip Code  
33027Purpose of Disbursement  
CONTRIBUTION REFUND

010

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2020

FEC Identification Number

C

Transaction ID : B5FAF61F5E

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HEGGEMEIER, DONALD, , ,**

Mailing Address 2154 E GARDENIA CIR

City  
NORTH FORT MYERSState  
FLZip Code  
33917Purpose of Disbursement  
CONTRIBUTION REFUND

010

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2020

FEC Identification Number

C

Transaction ID : B1417446AA4

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KASPRZYCKI, RICHARD, , ,**

Mailing Address 13 PARDEE PL

City  
EAST HAVENState  
CTZip Code  
06512Purpose of Disbursement  
CONTRIBUTION REFUND

010

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2020

FEC Identification Number

C

Transaction ID : B43BFFD2E1

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name (Last, First, Middle Initial)

**A. YORK, RAYMOND, , ,**

Mailing Address 8651 S WEST ST

City  
HAYSVILLEState  
KSZip Code  
67060Purpose of Disbursement  
CONTRIBUTION REFUND

010

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
10			22			2020					

FEC Identification Number

C

Transaction ID : B72D355F00f

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

100.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 21 OF 92

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GUN RIGHTS AMERICA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

ONLINE DISTRIBUTION COSTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

323.97

Transaction ID : D78046369ABB54C219BD

Amount Incurred This Period

0.00

Payment This Period

323.97

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

FUNDRAISING EMAILS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

703.66

Transaction ID : D25AB4BF4DE0C4A5A96E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

703.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

ONLINE DISTRIBUTION COSTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

147.95

Transaction ID : D1D262A7E989841039B6

Amount Incurred This Period

0.00

Payment This Period

147.95

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

703.66

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 22 OF 92

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GUN RIGHTS AMERICA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

ONLINE DISTRIBUTION COSTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

123.52

Transaction ID : DD22FBD6849F84239970

Amount Incurred This Period

0.00

Payment This Period

123.52

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

ONLINE DISTRIBUTION COSTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

123.65

Transaction ID : D83DFAF4C8158498B9BF

Amount Incurred This Period

0.00

Payment This Period

123.65

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NATIONAL ASSOCIATION FOR GUN RIGHTS**

Nature of Debt (Purpose):

ONLINE DISTRIBUTION COSTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELANDState  
COZip Code  
80537-3150

Outstanding Balance Beginning This Period

27.19

Transaction ID : D3727635C21814877BE5

Amount Incurred This Period

0.00

Payment This Period

27.19

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

703.66

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

703.66

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 23 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 9310 OLD KEENE MILL RD STE B					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City BURKE		State VA	Zip Code 22015-4281		Amount 2061.00
Purpose of Expenditure PMT FOR EST FROM 10/27/2020. TV ADVERTISING PRODUCTION; SEE EST TRANS ID#:...4FBCB81			Category/Type		Transaction ID : E122EF750BB43467FB45 Date of Disbursement or Obligation
Name of Federal Candidate: HICKENLOOPER, JOHN, W, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			8154.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 9310 OLD KEENE MILL RD STE B					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City BURKE		State VA	Zip Code 22015-4281		Amount 20009.00
Purpose of Expenditure PMT FOR EST FROM 10/27/2020. TV ADVERTISING PRODUCTION; SEE EST TRANS ID#:...454EBE7			Category/Type		Transaction ID : E22F5ADA851CF4368BBF Date of Disbursement or Obligation
Name of Federal Candidate: BULLOCK, STEVE, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			22066.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....					22070.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures .....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			[Electronically Filed]		Date
					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 27 / 2020	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <span style="border: 1px solid black; padding: 2px;">8007.00</span>	
City BURKE	State VA	Zip Code 22015-4281	Transaction ID : <b>E5D0CBE77F1C74F4C917</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020	
Purpose of Expenditure PMT FOR EST FROM 10/27/2020. TV ADVERTISING PRODUCTION; SEE EST TRANS ID#:...497B8C4			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate: SHAHEEN, JEANNE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13169.74</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 27 / 2020	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <span style="border: 1px solid black; padding: 2px;">5074.00</span>	
City BURKE	State VA	Zip Code 22015-4281	Transaction ID : <b>E2959E09B212F40D8813</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020	
Purpose of Expenditure PMT FOR EST FROM 10/27/2020. TV ADVERTISING PRODUCTION; SEE EST TRANS ID#:...4547855			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate: JONES, DOUG, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11372.65</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">13081.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	
[Electronically Filed]				



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2020	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <span style="border: 1px solid black; padding: 2px;">3900.00</span>	
City BURKE	State VA	Zip Code 22015-4281	Transaction ID : <b>EFB9070BCC5CE457B9E3</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Purpose of Expenditure PMT FOR EST FROM 10/27/2020. TV ADVERTISING PRODUCTION; SEE EST TRANS ID#:...4C02B34			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate: PETERS, GARY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9474.27</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>EL TORO</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020	
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>	
City LOUISVILLE	State KY	Zip Code 40202-1357	Transaction ID : <b>EE4FDA8F1119742AD963</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020	
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4E19BF6			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate: HICKENLOOPER, JOHN, W, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5819.89</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4400.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <b>BACKER, DAN, , ,</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>EL TORO</b>			<input type="checkbox"/> Memo Item		
Mailing Address 124 N 1ST ST			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		
City LOUISVILLE		State KY	Zip Code 40202-1357		
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4A88922			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: PETERS, GARY, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: MI		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">5298.13</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>EL TORO</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 124 N 1ST ST			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		
City LOUISVILLE		State KY	Zip Code 40202-1357		
Purpose of Expenditure DIGITAL ADVERTISING			Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: BULLOCK, STEVE, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: MT		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">1168.58</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">500.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>EL TORO</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>E00672DDB13944ED6B9C</b>
City LOUISVILLE State KY Zip Code 40202-1357					
Purpose of Expenditure DIGITAL ADVERTISING			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate: COLLINS, SUSAN, M, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>ME</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4494.95</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		<input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee <b>EL TORO</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>EE8FE7A761E9840B3BFB</b>
City LOUISVILLE State KY Zip Code 40202-1357					
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:....482495D			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020
Name of Federal Candidate: SHAHEEN, JEANNE, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5070.03</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020		<input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;">500.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....					<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"> </span>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

  

Full Name of Payee <b>EL TORO</b>			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020	
Mailing Address 124 N 1ST ST						Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>	
City LOUISVILLE		State KY		Zip Code 40202-1357			
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...43CF81D				Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Transaction ID : EFA200F82EA844BA4A2C Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: KELLY, MARK, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: AZ	
Calendar Year-To-Date Per Election for Office Sought				<span style="border: 1px solid black; padding: 2px;">5440.73</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>EL TORO</b>			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020	
Mailing Address 124 N 1ST ST						Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>	
City LOUISVILLE		State KY		Zip Code 40202-1357			
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4ADF9DB				Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Transaction ID : EFDB6757573294EFE934 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: BIDEN, JOSEPH, R, , JR.				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: 00	
Calendar Year-To-Date Per Election for Office Sought				<span style="border: 1px solid black; padding: 2px;">5257.26</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">1000.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,
[Electronically Filed]

Signature

Date M M / D D / Y Y Y Y Y Y  
12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>EL TORO</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020	
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>	
City LOUISVILLE	State KY	Zip Code 40202-1357	Transaction ID : <b>EFF65E4EF225B4FB7BBC</b>	
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4441AF1			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: CUNNINGHAM, CAL, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12409.84</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>EL TORO</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020	
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>	
City LOUISVILLE	State KY	Zip Code 40202-1357	Transaction ID : <b>EF31334CC4A894BFE815</b>	
Purpose of Expenditure PMT FOR EST FROM 10/22/2020. DIGITAL ADVERTISING: SEE EST TRANS ID#:...4359865			Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: JONES, DOUG, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6204.66</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1000.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Full Name of Payee <b>EL TORO</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 24 / 2020		
Mailing Address 124 N 1ST ST			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		
City LOUISVILLE	State KY	Zip Code 40202-1357	Transaction ID : <b>E4DF14AA7CC31453E96C</b>		
Purpose of Expenditure DIGITAL ADVERTISING: SEE EST TRANS ID#....4D159D1		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: BULLOCK, STEVE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MT</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1928.11</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 15 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">1000.00</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>ED1A7615F62E94C1B94E</b>		
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Name of Federal Candidate: JONES, DOUG, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>AL</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4544.32</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">500.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>15</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>128.24</span> </div>	
Purpose of Expenditure PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62			Transaction ID : <b>E87B5FCBE3926495A82A</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>			Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">3637.53</span>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>15</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>136.17</span> </div>	
Purpose of Expenditure PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4B2DB37			Transaction ID : <b>EFE233317BF324265941</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AZ</b>			Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">3645.59</span>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	264.41
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12
03
2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 15 / 2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">132.71</div>	
Purpose of Expenditure PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E			Transaction ID : <b>EA9F7C0242DCF43959E1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 19 / 2020</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">3842.45</div>	
Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 15 / 2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">128.34</div>	
Purpose of Expenditure PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810			Transaction ID : <b>E9E8D44DCF7BA4831888</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 19 / 2020</div> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">3662.06</div>	
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	261.05
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">131.36</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E543BC8FF68F04F0FAE9</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; float: right;">4544.32</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.13</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E8C32275D8F7A4B53BE8</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; float: right;">3512.90</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	258.49
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 34 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">121.80</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E4C418B161ACC451295F</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>AZ</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4657.78</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.97</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>EDE565C0C7AE241B2B7/</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5216.48</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	249.77
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 35 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">131.26</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	Transaction ID : <b>E17D29681E17D410CBCE</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>21</span> <span>2020</span> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b>00</b> State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">4473.71</span> </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>19</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">130.78</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	Transaction ID : <b>E264B975FB0CA4F15B73</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>21</span> <span>2020</span> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">4698.43</span> </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	262.04
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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03
2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 36 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">126.51</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E2480F0E2ED41420082B</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Purpose of Expenditure <b>DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E</b>		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">116.05</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E7F4D7C488FC84D56BBF</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Purpose of Expenditure <b>PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866</b>		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">242.56</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

Signature

*[Electronically Filed]*

Date

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 37 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">131.45</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E2C672976CCD5450EB05</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020	
Name of Federal Candidate: CUNNINGHAM, CAL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11621.27</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">130.23</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E89F1B1771ECD48EDB4E</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2020	
Name of Federal Candidate: SHAHEEN, JEANNE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4284.42</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">261.68</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 38 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">109.18</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>PMT FOR EST FROM 10/15/2020. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>EBA3032E6091C44F0887</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>ME</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3994.95</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">101.21</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E3D2DB4B26EE3459D8BF</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4385.63</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	210.39
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

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M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 39 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">95.76</div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4569.47</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate			District: <u>00</u> State: <u> </u>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2020 <input type="checkbox"/> Other (specify) ▶ <u> </u>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">101.59</div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	
Name of Federal Candidate: <b>KELLY, MARK, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">4759.37</div>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: <u> </u> State: <u>AZ</u>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2020 <input type="checkbox"/> Other (specify) ▶ <u> </u>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">197.35</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date

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2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>103.41</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 20px;"></span> <b>5819.89</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>20</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>99.70</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 20px;"></span> <b>5298.13</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	203.11
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12
03
2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 20 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">103.03</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E5AE0A14EBCBC4B7A95: Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2020		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose CUNNINGHAM, CAL, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11724.30</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 16 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">85.14</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E5CBB21D2B00B4FF0B6/ Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 23 / 2020		
Purpose of Expenditure PMT FOR EST FROM 10/16/2020. PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BULLOCK, STEVE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MT		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">668.58</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____			
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">188.17</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature BACKER, DAN, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
--	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 20 / 2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">100.98</div>	
Purpose of Expenditure <b>DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E</b>			Transaction ID : <b>E51FF63D7D11B4F5B86E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 23 / 2020</div> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>AL</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">5520.10</div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 24 / 2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">91.78</div>	
Purpose of Expenditure <b>PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62</b>			Transaction ID : <b>E1C5B040175924294919</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 26 / 2020</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>NH</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">5070.03</div>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">192.76</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">93.38</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : EA3500B59FE3848F38A0		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: HICKENLOOPER, JOHN, W, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6003.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">90.04</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E4F10A71D36D943DFAB2		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: PETERS, GARY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5481.38</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">183.42</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 24 / 2020         </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           90.30         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EF7049D97D67943C5BFC</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2020         </div>
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           6003.57         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 24 / 2020         </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           90.36         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EAE262380E0334C48B6E</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2020         </div>
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <b>AZ</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5440.73         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         180.66       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         180.66       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]  
 Signature Date 

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 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 45 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶
New report
Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">24</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">128.48</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36			Transaction ID : <b>EF4107648BB334329BEF</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">24</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">131.28</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04			Transaction ID : <b>EA6AF38EDB50D45739D7</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	259.76
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">128.25</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>ED653E56424B342A49B4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MT</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1928.11</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">93.46</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>E5C9E631797E14B419B6</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020		
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12409.84</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">221.71</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 47 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">91.00</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E1C58C01E928544CDB63</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: KELLY, MARK, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>AZ</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5440.73</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">92.08</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E5B75F358F72F47489A7</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2020	
Name of Federal Candidate: CUNNINGHAM, CAL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NC</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12409.84</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">183.08</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 48 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>24</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>93.40</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <u>00</u> State: <u>          </u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>5257.26</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <u>                                </u>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10</span> <span>24</span> <span>2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>128.06</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36			Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: <u>          </u> State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>4751.49</span> </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <u>                                </u>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;">221.46</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> </div>
(c) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12
03
2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 49 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> C00742635 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 24 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>91.44</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type	Transaction ID : <b>ECC97090235F64747A3E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>6204.66</span> </div>				

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 24 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>94.39</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/ Type	Transaction ID : <b>E10D96A323CCA419C994</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b>			Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>5257.26</span> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>185.83</span> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 50 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 24 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">93.12</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E</b>		Category/ Type	Transaction ID : <b>E32000575C40E4222A56</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 24 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">92.62</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62</b>		Category/ Type	Transaction ID : <b>EB71FEE3EF6284FD483B</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	185.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 51 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 24 / 2020         </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           93.21         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EFE2440B7E485405A96B</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2020         </div>
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5481.38         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2020         </div>	
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           91.84         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EDA2E3809467B448D9EB</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 28 / 2020         </div>
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12501.68         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         185.05       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         185.05       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶
New report
Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">93.99</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E			Category/ Type <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">6298.65</span> </div>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <b>AL</b>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">26</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">92.89</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60			Category/ Type <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">5574.27</span> </div>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: <b>MI</b>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="flex-grow: 1; border-bottom: 1px solid black;"></span> <span style="margin-left: 10px;">186.88</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="flex-grow: 1; border-bottom: 1px solid black;"></span>
(c) TOTAL Independent Expenditures .....	▶	<span style="flex-grow: 1; border-bottom: 1px solid black;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 53 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>92.71</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>ECB1F9F09216C4F4FBBE</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">5162.74</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 26 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>129.46</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>EC28077BC61314FAD8B0</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">2057.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	222.17
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 54 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">129.11</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36		Category/ Type	Transaction ID : <b>E6A1FD1254B1248B19BA</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>ME</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">88.30</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type	Transaction ID : <b>E4A481F323614486B953</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>AZ</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">217.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 55 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">91.37</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E02A67F1291974D50A80</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b>00</b> State: <b> </b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5348.63</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <b> </b>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">90.33</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EE2EB44A49C994A35A2E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b> </b> State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6093.90</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <b> </b>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	181.70
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">92.50</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>EA77A0ED211C741A5ADC</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2020		
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12594.18</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">92.44</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>ED2BBF2360F0945B88B9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2020		
Name of Federal Candidate: <b>KELLY, MARK, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>AZ</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5621.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">184.94</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 57 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">92.38</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/ Type	Transaction ID : <b>E68E9404496AD41EC8B0</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">125.21</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36		Category/ Type	Transaction ID : <b>EE1585BEFE6044DC0AB4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>ME</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">217.59</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">90.37</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E5C3094F9E3824550ABD</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>NH</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">13260.11</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">91.42</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E4B8988399906449DAA8</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: <b>00</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5440.05</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	181.79
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 59 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>90.84</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>E87679370FDD746DD8BB</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 30 / 2020</span> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>11463.49</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>134.14</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>EFD33F902633E43E3A5A</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 30 / 2020</span> </div>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>22200.71</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span></span> <span>224.98</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span></span> <span></span>
(c) TOTAL Independent Expenditures .....	▶	<span></span> <span></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 60 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 28 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>90.70</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>E4BEA65E215EE40E9944</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 30 / 2020</span> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <span style="border-bottom: 1px solid black;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <span style="border-bottom: 1px solid black;">CO</span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>8245.60</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black;"> </span>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 31 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>134.14</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>E1F6D6AD6A7DA4842B54</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <span style="border-bottom: 1px solid black;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <span style="border-bottom: 1px solid black;">MT</span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: flex-end;"> <span>22463.38</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <span style="border-bottom: 1px solid black;"> </span>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span>224.84</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span> </span>
(c) TOTAL Independent Expenditures .....	▶	<span> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 61 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">90.84</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type	Transaction ID : <b>EBB1FF91C8B694F26B07</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">90.37</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/ Type	Transaction ID : <b>ECDD2455EDA8E4626A34</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">181.21</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 62 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 31 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">92.44</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E06CAA2A3BC2F4AA8A01		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: KELLY, MARK, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5805.21</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 31 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">126.87</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : ED81396FAB5794FAEAD		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: COLLINS, SUSAN, M, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>ME</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5350.39</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">219.31</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 63 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 31 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>90.37</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>E9CFF4D71C06B47729A8</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">8426.67</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 31 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>92.38</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>E77592BE8874046DBA8B</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">9752.05</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	182.75
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 64 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 31 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">91.42</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : EA0D21D767E744ABD9E8		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: BIDEN, JOSEPH, R, , JR. <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5622.66</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 31 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">91.30</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E3138ADAE1F064A6485C		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 02 / 2020		
Name of Federal Candidate: KELLY, MARK, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5805.21</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">182.72</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 65 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 31 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           91.19         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>E900FED1161344FB399D</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b>00</b> State: <b> </b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">5622.66</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <b> </b>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>10 / 31 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           93.02         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>EFD9914C20D764A24B19</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b> </b> State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">9752.05</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ <b> </b>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">184.21</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 66 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
--	--

 Check if ☐ 24-hour report ☐ 48-hour report ▶
New report
Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">31</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">217.71</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36			Transaction ID : <b>E2284768566F64D6BBDD</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">11</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>ME</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">5350.39</span> </div>				

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">31</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Mailing Address <b>1 HACKER WAY</b>				
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">93.68</span> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E			Transaction ID : <b>EDFEA44FFFF4E445982E</b> Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">11</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">02</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2020</div> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 5px;">11648.01</span> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	311.39
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

12

03

2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 67 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">94.00</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E2F39D480F8304D89B0E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> <span>C00742635</span> </div>	
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">12688.18</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">90.70</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E4AEB81B56C3E40D8A0/</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 24px; margin-right: 10px;">C</span> <span>C00742635</span> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">8426.67</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	184.70
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 68 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">128.53</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E83B55EBD91EF40049CD</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020	
Name of Federal Candidate: BULLOCK, STEVE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MT</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">22463.38</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">91.04</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E3C52F9F87A8A431B93D</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020	
Name of Federal Candidate: SHAHEEN, JEANNE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13441.52</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">219.57</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13.76</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E6CD6E212623D43F797D</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>AZ</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5818.97</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7.80</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Transaction ID : <b>E62B9D03E38FD401B9B3</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <b>MI</b> <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9759.85</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">21.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M /

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Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2020	
Mailing Address 1 HACKER WAY		Amount <span style="border: 1px solid black; padding: 2px;">13.87</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E089BD7DA8AED4D969F8
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020
Name of Federal Candidate: HICKENLOOPER, JOHN, W, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: CO	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8440.54</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2020	
Mailing Address 1 HACKER WAY		Amount <span style="border: 1px solid black; padding: 2px;">9.55</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E06FA6D032FD2411AA9A
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020
Name of Federal Candidate: BIDEN, JOSEPH, R, , JR. <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5632.21</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">23.42</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
BACKER, DAN, , , Signature		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 71 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           9.12         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Transaction ID : <b>E81338F7B95044E29B59</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           13450.64         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10.46         </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Transaction ID : <b>E5E747BC56E9D44028AC</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           12698.64         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	19.58
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 01 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">11.43</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E21C229C1BA314C33A0F		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Name of Federal Candidate: COLLINS, SUSAN, M, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: ME		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5361.82</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 01 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">8.56</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : EAEC2323A113C490F912		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Name of Federal Candidate: JONES, DOUG, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: AL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11656.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">19.99</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 73 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">21.15</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E775E4EE2CE9D416BA5F</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PMT. FOR 10/15 EST. PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px; display: inline-block;"></div>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b> <div style="display: flex; justify-content: flex-end; align-items: center; margin-top: 5px;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose       </div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">22484.53</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">80.39</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E2AA6162C2DE34B90A87</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E</b>			Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px; display: inline-block;"></div>	
Name of Federal Candidate: <b>KELLY, MARK, , ,</b> <div style="display: flex; justify-content: flex-end; align-items: center; margin-top: 5px;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose       </div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AZ</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">6680.14</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	101.54
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">82.47</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4A48866		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>EF27741542470480DB89</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 05 / 2020		
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">27757.11</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>1 HACKER WAY</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	Amount <span style="border: 1px solid black; padding: 2px;">113.62</span>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4E7BB36		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>E1EA143F37E9C4ED5988</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 05 / 2020		
Name of Federal Candidate: <b>COLLINS, SUSAN, M, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>ME</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5475.44</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">196.09</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">81.28</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4C1B94E		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>	Transaction ID : <b>E3CC0C6D308DA44A4841</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>JONES, DOUG, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">12234.43</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">79.10</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F83B2E		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>	Transaction ID : <b>EB1A0DF8A3BED4FAAB5</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <b>00</b> State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">5711.31</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">160.38</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;"></div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">81.01</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E58896AB8214D44F3838</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4363B62		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2020	
Name of Federal Candidate: SHAHEEN, JEANNE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13564.97</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2020	
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">108.55</span>	
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E6ED3A0D4745041D9A1D</b>	
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4237A04		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 05 / 2020	
Name of Federal Candidate: BULLOCK, STEVE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>MT</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">22759.96</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">189.56</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>81.91</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4F9EB60		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>E7228181E88774FE7B76</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 05 / 2020</span> </div>	
Name of Federal Candidate: <b>PETERS, GARY, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">10951.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>77.83</span> </div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT. FOR 10/15 EST. DIGITAL ADVERTISING. SEE EST. TRANS. ID#...4FDB810		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"></span>	Transaction ID : <b>ED03D4668706840FF8EA</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 05 / 2020</span> </div>	
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">10371.27</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	159.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Mailing Address PO BOX 3900			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>E9A256047504F4EE28E9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
City SAN FRANCISCO	State CA	Zip Code 94139-0001			
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: COLLINS, SUSAN, M, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>ME</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4885.77</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Mailing Address PO BOX 3900			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>E797C844360644AA1B73</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
City SAN FRANCISCO	State CA	Zip Code 94139-0001			
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: PETERS, GARY, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>MI</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4567.65</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....					<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"> </span>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>PO BOX 3900</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94139-0001</b>			
Purpose of Expenditure <b>ESTIMATED OCTOBER ONLINE VOTER CONTACT</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>			
Name of Federal Candidate: <b>HICKENLOOPER, JOHN, W, ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">5088.51</div>		

 Disbursement For: ☐ Primary ☒ General  
 2020 ☐ Other (specify) ▶ \_\_\_\_\_

Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>PO BOX 3900</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94139-0001</b>			
Purpose of Expenditure <b>ESTIMATED OCTOBER ONLINE VOTER CONTACT</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>			
Name of Federal Candidate: <b>JONES, DOUG, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AL</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">5292.61</div>		

 Disbursement For: ☐ Primary ☒ General  
 2020 ☐ Other (specify) ▶ \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

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Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 80 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>GOOGLE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">16</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address <b>PO BOX 3900</b>				
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94139-0001</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
Purpose of Expenditure <b>ESTIMATED OCTOBER ONLINE VOTER CONTACT</b>			Transaction ID : <b>E712E472DF9184755972</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">4154.19</div>				

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>GOOGLE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">16</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address <b>PO BOX 3900</b>				
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94139-0001</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
Purpose of Expenditure <b>ESTIMATED OCTOBER ONLINE VOTER CONTACT</b>			Transaction ID : <b>E0145479BD9FC428C9C1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>BIDEN, JOSEPH, R, , JR.</b>			Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">4342.45</div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

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12

03

2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 81 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Mailing Address PO BOX 3900			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>E7297E127543F4167B43</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
City SAN FRANCISCO	State CA	Zip Code 94139-0001			
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: CUNNINGHAM, CAL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">12373.77</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020
Mailing Address PO BOX 3900			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		Transaction ID : <b>EAD48C292EB8042D8A98</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
City SAN FRANCISCO	State CA	Zip Code 94139-0001			
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: KELLY, MARK, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <b>AZ</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4535.98</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"> </span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"> </span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 82 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address <b>PO BOX 3900</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
City <b>SAN FRANCISCO</b>		State <b>CA</b>	Zip Code <b>94139-0001</b>		
Purpose of Expenditure <b>ESTIMATED OCTOBER ONLINE VOTER CONTACT</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 1583.44			Office Sought: <input type="checkbox"/> House District: <span style="border: 1px solid black; padding: 2px;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020			<input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
Full Name of Payee <b>MUDSHARE</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address <b>325 E JIMMIE LEEDS RD STE 117</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
City <b>GALLOWAY</b>		State <b>NJ</b>	Zip Code <b>08205-4126</b>		
Purpose of Expenditure <b>ESTIMATED OCTOBER TEXT MESSAGING</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: <b>SHAHEEN, JEANNE, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 4154.19			Office Sought: <input type="checkbox"/> House District: <span style="border: 1px solid black; padding: 2px;"> </span> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020			<input type="checkbox"/> Other (specify) ▶ <span style="border: 1px solid black; padding: 2px;"> </span>		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span> 0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	
Signature					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 83 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">554.75</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : E4BA993322A33404D84D
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: PETERS, GARY, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4567.65</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">926.45</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : E054A3FA269D5445DB73
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: HICKENLOOPER, JOHN, W, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5088.51</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 84 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>16</span> <span>2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7488.00</div>	
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING			Transaction ID : EF54101D8E8BC4A8F9A2 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: CUNNINGHAM, CAL, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-around;"> <span>10</span> <span>16</span> <span>2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">83.44</div>	
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING			Transaction ID : EEDF828B9287642348BC Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: BULLOCK, STEVE, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y

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2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">248.29</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : EDE178404926B4467BED
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: JONES, DOUG, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5292.61</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">390.39</span>		
City GALLOWAY		State NJ	Zip Code 08205-4126		Transaction ID : E74B6FFCF61CE484E9C0
Purpose of Expenditure ESTIMATED OCTOBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: KELLY, MARK, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4535.98</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">926.45</span> </div>	
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING			Transaction ID : <b>ED1041EE4B5D44580BF3</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: HICKENLOOPER, JOHN, W, ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">83.44</span> </div>	
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING			Transaction ID : <b>ED24122450F5E499DA40</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: BULLOCK, STEVE, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;">0.00</span> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;"></span> </div>
(c) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 10px;"></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 87 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">390.39</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : EA82C94ADC1574EFD912		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Name of Federal Candidate: KELLY, MARK, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6209.36</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">16.66</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : EB29B86C04E8F498B8BC		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Name of Federal Candidate: SHAHEEN, JEANNE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NH		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13467.30</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 03 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px; font-weight: bold; margin-right: 5px;">C</div> C00742635 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>11 / 02 / 2020</div> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div> 7488.00 </div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	Transaction ID : E7DFDFD96297D4E9D868 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div></div> </div>	
Name of Federal Candidate: CUNNINGHAM, CAL, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div> 20186.64 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div>11 / 02 / 2020</div> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div> 554.75 </div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> </div>	Transaction ID : E3844F71ED000467F862 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y Y Y</div> <div></div> </div>	
Name of Federal Candidate: PETERS, GARY, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div> 10314.60 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div>
(c) TOTAL Independent Expenditures .....	▶	<div style="border: 1px solid black; width: 100px; height: 20px; margin-right: 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 02 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>248.29</span> </div>	
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING			Transaction ID : <b>E45F464D1065947E5BE7</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: JONES, DOUG, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AL</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>11904.86</span> </div>				

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117				
City GALLOWAY	State NJ	Zip Code 08205-4126	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>554.75</span> </div>	
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING			Transaction ID : <b>EBB02F6BB129A45A4957</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: PETERS, GARY, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>10951.26</span> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>0.00</span> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>
(c) TOTAL Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">248.29</div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type	Transaction ID : EF0B80EFA187645BAB78 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: JONES, DOUG, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AL	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">2020</div> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">390.39</div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type	Transaction ID : EA1F4695B8A5B40BDB27 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: KELLY, MARK, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M /

D D /

Y Y Y Y Y Y

12

03

2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 91 OF 92  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">16.66</span> </div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Transaction ID : <b>E6B764B6510BF400998E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: SHAHEEN, JEANNE, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">13564.97</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>MUDSHARE</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>11 / 03 / 2020</span> </div>	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-left: 100px;">83.44</span> </div>	
City GALLOWAY	State NJ	Zip Code 08205-4126		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Transaction ID : <b>E1BF7BCE20BFF4B19856</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>	
Name of Federal Candidate: BULLOCK, STEVE, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MT</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;">22759.96</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 03 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">7488.00</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : <b>ED5582FB0AFB9477599F</b>		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Name of Federal Candidate: CUNNINGHAM, CAL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">27757.11</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 11 / 03 / 2020		
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">926.45</span>		
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : <b>E97E1D3C7695D44F4A4E</b>		
Purpose of Expenditure ESTIMATED NOVEMBER TEXT MESSAGING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>		
Name of Federal Candidate: HICKENLOOPER, JOHN, W, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>CO</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">10371.27</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">52049.51</span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 12 / 03 / 2020	